



P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961 ✉ pkrjainhealthcare@gmail.com

NAME : Mrs. ANURADHA
AGE/ GENDER : 41 YRS/FEMALE
COLLECTED BY :
REFERRED BY :
BARCODE NO. : 12504715
CLIENT CODE. : P.K.R JAIN HEALTHCARE INSTITUTE
CLIENT ADDRESS : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

PATIENT ID : 1598963
REG. NO./LAB NO. : 122409150002
REGISTRATION DATE : 15/Sep/2024 09:43 AM
COLLECTION DATE : 15/Sep/2024 09:44 AM
REPORTING DATE : 15/Sep/2024 12:05 PM

Test Name	Value	Unit	Biological Reference interval
-----------	-------	------	-------------------------------

ENDOCRINOLOGY

THYROID STIMULATING HORMONE (TSH)

THYROID STIMULATING HORMONE (TSH): SERUM 6.41^H μ IU/mL 0.35 - 5.50

by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)

3rd GENERATION, ULTRASENSITIVE

INTERPRETATION:

AGE	REFERENCE RANGE (μ IU/mL)
0 – 5 DAYS	0.70 – 15.20
6 Days – 2 Months	0.70 – 11.00
3 – 11 Months	0.70 – 8.40
1 – 5 Years	0.70 – 7.00
6 – 10 Years	0.60 – 5.50
11 - 15	0.50 – 5.50
> 20 Years (Adults)	0.27 – 5.50
PREGNANCY	
1st Trimester	0.10 - 3.00
2nd Trimester	0.20 - 3.00
3rd Trimester	0.30 - 4.10

NOTE:- TSH levels are subjected to circadian variation, reaching peak levels between 2-4 a.m and at a minimum between 6-10 pm. The variation is of the order of 50 %. Hence time of the day has influence on the measured serum TSH concentration.

USE:- TSH controls biosynthesis and release of thyroid hormones T4 & T3. It is a sensitive measure of thyroid function, especially useful in early or subclinical hypothyroidism, before the patient develops any clinical findings or goitre or any other thyroid function abnormality.

INCREASED LEVELS:

- 1.Primary or untreated hypothyroidism, may vary from 3 times to more than 100 times normal depending on degree of hypofunction.
- 2.Hypothyroid patients receiving insufficient thyroid replacement therapy.
- 3.Hashimotos thyroiditis.
- 4.DRUGS: Amphetamines, Iodine containing agents and dopamine antagonist.
- 5.Neonatal period, increase in 1st 2-3 days of life due to post-natal surge.

DECREASED LEVELS:

- 1.Toxic multi-nodular goitre & Thyroiditis.
- 2.Over replacement of thyroid hormone in treatment of hypothyroidism.
- 3.Autonomously functioning Thyroid adenoma
- 4.Secondary pituitary or hypothalamic hypothyroidism
- 5.Acute psychiatric illness
- 6.Severe dehydration.



DR.VINAY CHOPRA
CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA
CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY)





P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961 ✉ pkrajainhealthcare@gmail.com

NAME	: Mrs. ANURADHA	PATIENT ID	: 1598963
AGE/ GENDER	: 41 YRS/FEMALE	REG. NO./LAB NO.	: 122409150002
COLLECTED BY	:	REGISTRATION DATE	: 15/Sep/2024 09:43 AM
REFERRED BY	:	COLLECTION DATE	: 15/Sep/2024 09:44AM
BARCODE NO.	: 12504715	REPORTING DATE	: 15/Sep/2024 12:05PM
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITUTE		
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA		

Test Name	Value	Unit	Biological Reference interval
-----------	-------	------	-------------------------------


7.DRUGS: Glucocorticoids, Dopamine, Levodopa, T4 replacement therapy, Anti-thyroid drugs for thyrotoxicosis.


8.Pregnancy: 1st and 2nd Trimester

LIMITATIONS:

- 1.TSH may be normal in central hypothyroidism, recent rapid correction of hyperthyroidism or hypothyroidism, pregnancy, phenytoin therapy.
- 2.Autoimmune disorders may produce spurious results.




DR.VINAY CHOPRA
CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY & MICROBIOLOGY)


DR.YUGAM CHOPRA
CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY)





P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961 ✉ pkrajainhealthcare@gmail.com

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

NAME	: Mrs. ANURADHA	PATIENT ID	: 1598963
AGE/ GENDER	: 41 YRS/FEMALE	REG. NO./LAB NO.	: 122409150002
COLLECTED BY	:	REGISTRATION DATE	: 15/Sep/2024 09:43 AM
REFERRED BY	:	COLLECTION DATE	: 15/Sep/2024 09:44 AM
BARCODE NO.	: 12504715	REPORTING DATE	: 15/Sep/2024 06:42 PM
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITUTE		
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA		

Test Name	Value	Unit	Biological Reference interval
-----------	-------	------	-------------------------------

IMMUNOPATHOLOGY/SEROLOGY

ANTI THYROID PEROXIDASE (TPO/AMA) ANTIBODIES

ANTI TPO/AMA ANTIBODIES: SERUM	< 1.00	IU/mL	0.00 - 10.0
by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)			DIABETES (II): < 25.0

INTERPRETATION:

1. Thyroperoxidase (TPO) is an enzyme involved in thyroid hormone synthesis, catalyzing the oxidation of iodide on tyrosine residues in thyroglobulin for the synthesis of triiodothyronine and thyroxine (tetraiodothyronine).
2. TPO is a membrane-associated hemo glycoprotein expressed only in thyrocytes and is one of the most important thyroid gland antigens.
3. Anti-TPO is technically superior and a more specific method for measuring thyroid auto-antibodies, It is especially useful in patients presenting with subclinical hypothyroidism where TSH is elevated but Free T4 levels are normal.

INCREASED LEVELS (Autoimmune thyroid disease):

1. Hashimoto thyroiditis.
2. Idiopathic myxedema.
3. Graves disease
4. Post-partum thyroiditis.
5. Primary hypothyroidism due to Hashimoto thyroiditis.

NOTE:

1. The highest TPO antibody levels are observed in patients suffering from Hashimoto thyroiditis. In this disease, the prevalence of TPO antibodies is about 90% of cases, confirming the autoimmune origin of the disease.
2. These auto-antibodies also frequently occur (60%-80%) in the course of Graves disease.
3. In patients with subclinical hypothyroidism, the presence of TPO antibodies is associated with an increased risk of developing overt hypothyroidism.

*** End Of Report ***



DR.VINAY CHOPRA

CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA

CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY)

